PTO/SB/17 (07-07)
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Olider tile Pa	perwork reduction A	ct or 1995, no perso	ii are requir	ed to respond to a co				JIVIB CONTROL NO.	
Fees nursuant to the Co	Effective on 12/08/2		IR 4818)	Application Num		olete if Know 0/523,023-Co			
FEE TRANSMITTAL						November 7, 2005			
						Gordon COOK			
For FY 2007						M. A. Brown			
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 37		3772			
TOTAL AMOUNT OF PAYMENT (\$) 620.00)	Attorney Docket No. 4		4140-0112PUS1			
METHOD OF PA	YMENT (check	all that apply)			<u> </u>				
	Credit Card	Money Order	Noi	ne Other (please identify	·):			
x Deposit Account	Deposit Account N	tumber: 02	2-2448	Deposit	Account Name:	Birch, Stewa	art, Kolasch	& Birch,	
For the abov	e-identified depo	sit account, the	Director is	hereby authorize	ed to: (checl	k all that apply)			
x Charge	e fee(s) indicated	below		Charge	e fee(s) indi	icated below, e	xcept for the	e filing fee	
	e any additional f under 37 CFR 1.		yments o	f x Credit	any overpa	yments			
FEE CALCULATI									
1. BASIC FILING, S	EARCH, AND EX	CAMINATION FE	EES			· · · · · · · · · · · · · · · · · · ·			
	FILING FEES SEARCH FEES EXAMINATION FEES						;		
Application Type	Fee (\$	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pa	aid (\$)	
Utility	300	150	500	250	200	100		147	
Design	200	100	100	50	130	65			
Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300			
Provisional	200	100	0	0	0	0			
2. EXCESS CLAIM I	FEES							mall Entity	
Fee Description							Fee (\$)	Fee (\$)	
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)							50	25	
•	•	iding Reissues)					200	100	
Multiple dependent							360	180	
Total Claims	Extra Claims	Fee (\$)	Fee	Paid (\$)	Multiple Depende				
9 - = HP = highest number of	total claims paid for				<u>Fee</u>) (\$)	Fee Paid (\$)		
Indep. Claims	Extra Claims	Fee (\$)	Fee I	Paid (\$)		 -		-	
3 .=									
HP = highest number of	independent claims	paid for, if greater th	nan 3.						
	and drawings ex 7 CFR 1.52(e)),	he application s	ize fee dı	(excluding electr ne is \$250 (\$125 f 37 CFR 1.16(s).					
<u>Total Sheets</u>	Extra Sheet			idditional 50 or frac (round up to a who			<u>Fee P</u>	aid (\$)	
4. OTHER FEE(S)					,		Fees F	Paid (\$)	
Non-English Spe	cification, \$130) fee (no small e	ntity disc	ount)					
Other (e.g., late filing surcharge): 1402 Filing a brief in support of an appeal 500.00 1251 Extension for response within first month 120.00									
SUBMITTED BY	`								
Signature Registration No. (Attorney/Agent) 39,538 Telephone								(703) 205-8000	
Name (Print/Type James T. Eller, Jr. Date							August 31, 2007		